

UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450
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NOTICE REQUIRING EXCESS CLAIMS FEES

The excess claim(s) filed on 3/13/24 7/8/25 is not accompanied by the appropriate payment of excess claims fees set forth in 37 CFR 1.16(h)-(j) or 1.492(d)-(f). Excess claims fees are required for each claim in independent form in excess of three (§ 1.16(h)), each claim (whether dependent or independent) in excess of twenty (note that § 1.75(c) indicates how multiple dependent claims are considered for fee calculation purposes) (§ 1.16(i)), and each application that contains a multiple dependent claim (§ 1.16(j)).

Since the application is not under a final rejection, applicant is given a time period of **ONE (1) MONTH or THIRTY (30) DAYS** from the mailing date of this notice, whichever is longer, to submit either: (1) the fee payment of \$ _____ or (2) an amendment in compliance with 37 CFR 1.121 that cancels the excess claim(s), in order to avoid ABANDONMENT. Extensions of this time period may be granted under 37 CFR 1.136, unless the excess claim(s) was presented in a preliminary amendment.

- ☐ 1. The funds in Deposit Account No. _____ are insufficient to cover the entire fee due. The balance is due within the time period set forth in this notice. See note below regarding the appropriate service charge.
- ☐ 2. The Credit Card payment to cover the entire fee due to Account _____ (Card type + last 4 digits ONLY) was refused. The balance is due within the time period set forth in this notice. See note below regarding the appropriate service charge.
- ☐ 3. The amendment that includes the excess claim(s) has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record (PTO/SB/06). Remittance or authorization is due within the time period set forth in this notice.
- ☐ 4. The fee submitted in this application is insufficient. A balance of \$ _____ is due for presentation of excess claims (37 CFR 1.16(h)-(j) or 1.492(d)-(f)).
- ☒ 5. Other.

Explanation (Provide specific details of the required correction in order to assist the applicant. Indicate whether a service charge has been added to the fee due):

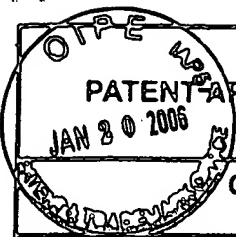
See fee sheet

THE AMOUNT OF THE FEE(S) DUE IS SUBJECT TO CHANGE, GENERALLY ON OCTOBER 1 OF EACH YEAR (37 CFR 1.16, 1.21 & 1.492). THE AMOUNT OF THE FEE(S) DUE IS DETERMINED AS OF THE DATE A COMPLETE REPLY WITH THE APPROPRIATE FEE(S) IS RECEIVED BY THE OFFICE (37 CFR 1.8 & 1.10). BECAUSE THE AMOUNT DUE IS SUBJECT TO CHANGE, IT IS RECOMMENDED THAT APPLICANT CHECK THE CURRENT FEE SCHEDULE WHICH IS AVAILABLE ON THE USPTO'S WEBSITE AT: <http://www.uspto.gov/web/offices/ac/qs/ope/fees.htm>

Service Charges: There is a \$50 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(m)). There is a \$25.00 service charge for each month when the balance of a deposit account is below \$1000 at the end of the month (37 CFR 1.21(b)(2)).

Regina Battinieri (571) 272- 6625
Technical Support Staff (TSS)

Note to TSS: Please do NOT use this notice if the application is under a final rejection.



PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

677583

CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	39 minus 20 =	19
INDEPENDENT CLAIMS	5 minus 3 =	2
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

2/13/2

CLAIMS AS AMENDED - PART II

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
AMENDMENT A				
Total	38	Minus	39	=
Independent	7	Minus	5	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

7/13/5

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
AMENDMENT B				
Total	39	Minus	39	=
Independent	16	Minus	7	= 9
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
AMENDMENT C				
Total		Minus		=
Independent		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY

TYPE ☐

OR

OTHER THAN
SMALL ENTITY

RATE	FEE		RATE	FEE
	345.00	OR		690.00
X\$ 9=	171. ⁰⁰	OR	X\$18=	
X39=	78. ⁰⁰	OR	X78=	
+130=		OR	+260=	
TOTAL	594. ⁰⁰	OR	TOTAL	

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=	86	OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=	900	OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	